

Summer Reading 2006

Parent Sign-off Sheet for Students in Grades K-4

*Please return this sign-off sheet to your child's classroom teacher the first week of school.
Thank you for your cooperation! ☺*

Student's name: _____

Student's grade: _____

Required book title:

Optional book titles (*at least two*):

- _____
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- _____
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- _____
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- _____
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- _____
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Parent signature: _____

Date: _____

Parent feedback (*optional, but encouraged!*):
